## PATENT APPLICATION SÉ DETERMINATION RECORD Effectiv Dotober 1, 2003

plication or Docket Number

_	Effective October 1, 2003								107301317					
		CLAIMS		FILED - PART I (Column 1) (Column 2)				SMALL ENTITY			OTHER THAN			
	TOTAL CLAIN	<b>MS</b>						RATE	FE		RATE			
	FOR		NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	<del>-  </del> -	$\dashv$	BASIC FI	1.00		
╟	TOTAL CHARG	29	ninus 20=	-	19		VC 0			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	1/050			
	NDEPENDENT	CLAIMS	121	minus 3 =			1 }	XS 9=		$\dashv^{\circ}$	R X\$18=	346		
卜	MULTIPLE DEP	ENDENT CLAIM			L		1 }	X43=		_ 0	R X86=			
<u> </u> -	If the differen			loca than rare location is said and O			J [	+145=		0	-290=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL			R TOTAL			
		CLAIMS AS (Column 1)	AMENDE	MENDED - PART II (Column 2) (Column 3)				CRAALI	CAITITY	' OF		RTHAN		
	T .	CLAIMS	i	HIGHE				7			SMALL	ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMB PREVIOU PAID F	IER USLY	PRESENT EXTRA		RATE	TIONA FEE		RATE	ADDI- TIONAL FEE		
S	Total.	•	Minus	**		=		XS 9=		OF	XS18=			
ME	Independent	•	Minus	***		=		X43=		7	Voc			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPEN				CLAIM		-		<del> </del>	-JOF	1	<u> </u>		
								+145=		OR	+290=			
								TOTAL DIT. FEE		OR	TOTAL			
(Column 1) (Column 2) (Column 3)										٠.				
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	-]	RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	•	Minus	**		= .	,	K\$ 9=		OR	X\$18=	<del> </del>		
ME	Ingependent	•	Minus	***		=	<u> </u>	X43=		1	X86=			
<u> </u>	FIRST PRESE	NTATION OF MU	JLTIPLE DEI	PENDENT C	LAIM		<u> </u>			OR	700=			
							145=		OR	+290=				
						• • •	ADE	TOTAL IT. FEE	٠	OR	TOTAL ADDIT. FEE			
		(Column 1)	-	(Column 2) (Column 3)										
AMENOMENIC		CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBER PREVIOUS PAID FOI	R SLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	<b>Total</b>	•	Minus	••		=	X	\$ 9=		OR	X\$18=			
M H	Independent		Minus	***		=	Y	43=			X86=			
	FIRST PRESE	RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								OR	700-			
* If the entry in column 1 is less than the entry in column 2 write 20° in column 2										OR	+290=			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  TOTAL ADDIT. FEE										OR A	TOTAL DDIT. FEE			
. Ti	he "Highest Num!	per Previously Paid per Previously Paid	For (Total or	ndependent)	ss than is the h	3, enter "3." ighest number f		·	opriate box			1		
							_					ŀ		